As from today Medicaid stop reimbursement for some reasonably preventable nosocomial infections. This article is another that describes the impact of this legislation.


First 150 words of the article

For every 100 patients admitted to US hospitals in 2002, 4.5 patients developed a nosocomial infection. On October 1, 2008, the Centers for Medicare and Medicaid Services (CMS) will stop reimbursement to hospitals for the cost of treating nosocomial catheter-associated urinary tract infections, vascular catheter-associated bloodstream infections, and surgical site infections following certain elective procedures, including mediastinitis, certain orthopedic surgeries, and bariatric surgery. This regulation arises from the Deficit Reduction Act, signed by the president on February 8, 2006. The goal is to reduce the increases in Medicare and Medicaid spending by stopping payments for conditions that result in the assignment of a higher-cost diagnosis related group and, in the opinion of the regulators, are “reasonably preventable” by the application of evidence-based guidelines.

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